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Listed below are the item(s) being submitted with this Certificate of Transmission:**

- 1) Fee Transmittal (1 page)
- 2) RCE Transmittal (1 page)
- 3) Response (3 pages)
- 4)

Number of Pages Including this Page: 6

Inventor(s): Pancheri, et al.

S.N.: 10/697,734

Filed: October 29, 2003

Case: 9399

Comments:

****Note:** Each paper must have its own certificate of transmission, OR this certificate must identify each submitted paper.

FEE TRANSMITTAL for FY 2006 Patent fees are subject to annual revision. Effective December 8, 2004	Complete if Known	
	Application Number	10/697,734
	Confirmation Number	7723
	Filing Date	October 29, 2003
	First Named Inventor	Eugene Joseph Pancheri
	Examiner Name	Jiping Lu
TOTAL AMOUNT OF PAYMENT (\$) 120.00	Art Unit	3749
	Attorney Docket No.	9399

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METHOD OF PAYMENT		FEE CALCULATION (continued)																															
1. <input checked="" type="checkbox"/> The Director is hereby authorized to charge indicated fees submitted on this form, credit any over payments, and charge any additional fee(s) during the pendency of this application to: Deposit Account Number: 16-2480 Deposit Account Name: The Procter & Gamble Company		5. ADDITIONAL FEES <table border="1"> <thead> <tr> <th>Fee Description</th><th>Fee Paid</th></tr> </thead> <tbody> <tr> <td>Extension for reply within 1st month</td><td>(\$120) <input checked="" type="checkbox"/></td></tr> <tr> <td>Extension for reply within 2nd month</td><td>(\$450) <input type="checkbox"/></td></tr> <tr> <td>Extension for reply within 3rd month</td><td>(\$1,020) <input type="checkbox"/></td></tr> <tr> <td>Extension for reply within 4th month</td><td>(\$1,590) <input type="checkbox"/></td></tr> <tr> <td>Extension for reply within 5th month</td><td>(\$2,160) <input type="checkbox"/></td></tr> <tr> <td>Information Disclosure Statement fee</td><td>(\$180) <input type="checkbox"/></td></tr> <tr> <td>37 CFR 1.16(f) Late Oath/Declaration (nonprovisional)</td><td>(\$130) <input type="checkbox"/></td></tr> <tr> <td>37 CFR 1.17 (g) Surcharge - Late provisional filing fee or cover sheet</td><td>(\$50) <input type="checkbox"/></td></tr> <tr> <td>Non-English specification</td><td>(\$130) <input type="checkbox"/></td></tr> <tr> <td>Notice of Appeal</td><td>(\$500) <input type="checkbox"/></td></tr> <tr> <td>Filing a brief in support of an appeal</td><td>(\$500) <input type="checkbox"/></td></tr> <tr> <td>Request for oral hearing</td><td>(\$1,000) <input type="checkbox"/></td></tr> <tr> <td>Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (e)</td><td>(\$1,370) <input type="checkbox"/></td></tr> <tr> <td>Other:</td><td><input type="checkbox"/></td></tr> </tbody> </table>		Fee Description	Fee Paid	Extension for reply within 1 st month	(\$120) <input checked="" type="checkbox"/>	Extension for reply within 2 nd month	(\$450) <input type="checkbox"/>	Extension for reply within 3 rd month	(\$1,020) <input type="checkbox"/>	Extension for reply within 4 th month	(\$1,590) <input type="checkbox"/>	Extension for reply within 5 th month	(\$2,160) <input type="checkbox"/>	Information Disclosure Statement fee	(\$180) <input type="checkbox"/>	37 CFR 1.16(f) Late Oath/Declaration (nonprovisional)	(\$130) <input type="checkbox"/>	37 CFR 1.17 (g) Surcharge - Late provisional filing fee or cover sheet	(\$50) <input type="checkbox"/>	Non-English specification	(\$130) <input type="checkbox"/>	Notice of Appeal	(\$500) <input type="checkbox"/>	Filing a brief in support of an appeal	(\$500) <input type="checkbox"/>	Request for oral hearing	(\$1,000) <input type="checkbox"/>	Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (e)	(\$1,370) <input type="checkbox"/>	Other:	<input type="checkbox"/>
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2. BASIC FILING FEE - Large Entity <table border="1"> <thead> <tr> <th></th><th>FILING FEE</th><th>SEARCH FEE</th><th>EXAMINATION FEE</th><th>Fee Paid</th></tr> </thead> <tbody> <tr> <td>Utility</td><td>(\$300)</td><td>(\$500)</td><td>(\$200)</td><td>(Total = \$1000) <input type="checkbox"/></td></tr> <tr> <td>Design</td><td>(\$200)</td><td>(\$100)</td><td>(\$130)</td><td>(Total = \$430) <input type="checkbox"/></td></tr> <tr> <td>Reissue</td><td>(\$300)</td><td>(\$500)</td><td>(\$600)</td><td>(Total = \$1400) <input type="checkbox"/></td></tr> <tr> <td>Provisional filing fee</td><td></td><td></td><td></td><td>(Total = \$200) <input type="checkbox"/></td></tr> </tbody> </table>			FILING FEE	SEARCH FEE	EXAMINATION FEE	Fee Paid	Utility	(\$300)	(\$500)	(\$200)	(Total = \$1000) <input type="checkbox"/>	Design	(\$200)	(\$100)	(\$130)	(Total = \$430) <input type="checkbox"/>	Reissue	(\$300)	(\$500)	(\$600)	(Total = \$1400) <input type="checkbox"/>	Provisional filing fee				(Total = \$200) <input type="checkbox"/>	3. APPLICATION SIZE FEE: Sheets of Spec and Drawings <input type="checkbox"/> (\$250 for each 50 sheets in excess of 100, except for sequence and program listings) SUBTOTAL (2)+(3) (\$)[0]						
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4. EXTRA CLAIM FEES FOR UTILITY AND REISSUE: <table border="1"> <thead> <tr> <th></th><th>Extra Claims</th><th>Fee from Below</th><th>Fee Paid</th></tr> </thead> <tbody> <tr> <td>Total Claims $\square - 20^{**} = \square \times$</td><td>$\square$</td><td>$=$</td><td>$\square$</td></tr> <tr> <td>Independent Claims $\square - 3^{**} = \square \times$</td><td>$\square$</td><td>$=$</td><td>$\square$</td></tr> <tr> <td>Multiple Dependent claims:</td><td>\square</td><td>$=$</td><td>\square</td></tr> </tbody> </table> ** or number previously paid, if greater; For Reissues, see below Fee Description Claims in excess of 20 (\$50 per claim) Independent claims in excess of 3 (\$200 per claim) Multiple dependent claim, if not paid (\$360) **Reissue: each independent claim over 3 and more than in the original patent (\$200 per claim) **Reissue claims: each claim over 20 and more than original patent (\$50 per claim) SUBTOTAL (4) (\$)[0]			Extra Claims	Fee from Below	Fee Paid	Total Claims $\square - 20^{**} = \square \times$	\square	$=$	\square	Independent Claims $\square - 3^{**} = \square \times$	\square	$=$	\square	Multiple Dependent claims:	\square	$=$	\square	SUBTOTAL(5) (\$) 120															
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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Julia A. Glazer	Registration No.	41,783
Signature		(Attorney/Agent)	
		Telephone	(513) 627-4132
		Date	March 27, 2006

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